

TRANSCRIPT ORDER

Read Instructions on Back.

1. NAME Marivic P. David, AUSA		2. PHONE NUMBER 479-4120	3. DATE November 4, 2005
4. MAILING ADDRESS 108 Hernan Cortez Ave., Ste. 500		5. CITY Hagatna	6. STATE Guam
8. CASE NUMBER Cr. 98-00310-2	9. JUDICIAL OFFICIAL CBM	7. ZIP CODE 96910	
12. CASE NAME U.S. v. Rex S. Alado		DATES OF PROCEEDINGS 10. FROM 8/10/2005 11. TO 8/11/2005	
		LOCATION OF PROCEEDINGS 13. CITY Hagatna 14. STATE Guam	
15. ORDER FOR <input type="checkbox"/> APPEAL <input checked="" type="checkbox"/> NON-APPEAL		<input checked="" type="checkbox"/> CRIMINAL <input type="checkbox"/> CIVIL	<input type="checkbox"/> CRIMINAL JUSTICE ACT <input type="checkbox"/> IN FORMA PAUPERIS
16. TRANSCRIPT REQUESTED (Specify portion(s) and date(s) of proceeding(s) for which transcript is requested)			

PORTIONS	DATE(S)	PORTION(S)	DATE(S)
<input type="checkbox"/> VOIR DIRE		<input type="checkbox"/> TESTIMONY (Specify Witness)	
<input type="checkbox"/> OPENING STATEMENT (Plaintiff)			
<input type="checkbox"/> OPENING STATEMENT (Defendant)			
<input type="checkbox"/> CLOSING ARGUMENT (Plaintiff)		<input checked="" type="checkbox"/> PRE-TRIAL PROCEEDING (Spcy)	
<input type="checkbox"/> CLOSING ARGUMENT (Defendant)		Change of Plea	8/10 - 8/11/2005
<input type="checkbox"/> OPINION OF COURT		<input type="checkbox"/> OTHER (Specify)	
<input type="checkbox"/> JURY INSTRUCTIONS			
<input type="checkbox"/> SENTENCING			
<input type="checkbox"/> BAIL HEARING			

17. ORDER

FILED

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DAILY	<input type="checkbox"/>	<input type="checkbox"/>	NO. OF COPIES		
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M CERTIFICATION (18. & 19.)
By signing below, I certify that I will pay all charges
(deposit plus additional).

18. SIGNATURE	ESTIMATE TOTAL
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19. DATE November 4, 2005	PHONE NUMBER
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TRANSCRIPT TO BE PREPARED BY	COURT ADDRESS	
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ORDER RECEIVED	DATE	BY	
DEPOSIT PAID			DEPOSIT PAID
TRANSCRIPT ORDERED			TOTAL CHARGES
TRANSCRIPT RECEIVED			LESS DEPOSIT
ORDERING PARTY NOTIFIED TO PICK UP TRANSCRIPT			TOTAL REFUNDED
PARTY RECEIVED TRANSCRIPT			TOTAL DUE